

# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

CALIFORNIA  
FORM 496

NAME OF FILER

I.D. NUMBER (If applicable)

NATIONAL ASSOCIATION OF REALTORS FUND (NONPROFIT 527 ORGANIZATION)

1344093

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
02/18/2015	MLS LISTINGS INC 350 OAKMEAD PARKWAY, 2ND FLOOR SUNNYVALE, CA 94085 CONTRIBUTION RECEIVED VIA NATIONAL ASSOCIATION OF REALTORS AS INTERMEDIARY	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		7,341.50	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

### \*\*Contributor Codes

IND – Individual  
 COM – Recipient Committee (other than PTY or SCC)  
 OTH – Other  
 PTY – Political Party  
 SCC – Small Contributor Committee

FPPC Form 496 (March/2011)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

From:

02/19/2015 13:00

#380 P. 002/002

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Type or print in ink.  
Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> NATIONAL ASSOCIATION OF REALTORS FUND (NONPROFIT 527 ORGANIZATION)			<b>Date of This Filing</b> 02/19/2015		<b>Date Stamp</b>	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (312) 329-8381		<b>I.D. NUMBER (if applicable)</b> 1344093		<b>Report No.</b> 20150219R		
<b>STREET ADDRESS</b> 430 N. MICHIGAN AVENUE						
<b>CITY</b> CHICAGO	<b>STATE</b> IL	<b>ZIP CODE</b> 60611				
<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)					<b>No. of Pages</b> 2	

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> CHRISTOPHER RIZZOTTI				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD</b> City Council Member: CITY OF BURBANK	<b>DISTRICT NO.</b>	<b>SUPPORT</b> X	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

## 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
02/18/2015	TELEPHONE CALLS Cumulative to date total \$39696.17	2,095.18

Reason for Amendment: \_\_\_\_\_